

CA Department of Alcohol and Drug Programs Community Alcohol and Other Drug Stakeholder Meeting FUNCTIONS RETAINED AT STATE LEVEL (Proposed) October 2011

Functions to be Maintained at the State Level (Proposed):

Administration of the federal Substance Abuse Prevention and Treatment SAPT Block Grant

 Serve as the Single State Agency (SSA) for Alcohol and Other Drug (AOD) and principal state agency for receipt of Substance Abuse Prevention and Treatment (SAPT) Block Grant (BG) and other federal awards.

The State's Chief Executive Officer designates a single executive branch department to administer the Block Grant, the Single State Agency (SSA). The SSA is solely responsible for administering authorized activities to prevent and treat substance abuse and related activities (45 CFR 96.121). The Department of Alcohol and Drug Programs (ADP) is designated as the SSA responsible for administering and coordinating the State's efforts in prevention, treatment, and recovery services for AOD abuse and problem gambling. ADP coordinates the state's strategic efforts to achieve measurable reductions in the incidence and prevalence of the inappropriate use of alcohol and other drugs by youth and adults. ADP is also the primary state agency responsible for interagency coordination of these services.

• Fiscal responsibility, oversight and audit functions

Continue to perform the functions for receipt of the BG – includes both fiscal responsibility and oversight, and audit functions.

The SAPT BG provides the fiscal and programmatic infrastructure and administrative support for the state and counties for the publicly funded AOD services system. ADP is responsible for ensuring that the various SAPT Block Grant requirements are achieved and reported annually in each year's SAPT Block Grant application.

As a condition of receiving the federal Substance Abuse and Mental Health Services Administration (SAMHSA) SAPT Block Grant, the SSA for substance abuse prevention and treatment must adhere to the following key provisions of the SAPT Block Grant:

- Analyze BG application requirements, develop responses to, and submit an application for funding on an annual basis.
- Ensure the use of at least 20 percent of the SAPT Block Grant on primary prevention activities
- Maintain a calculated base of expenditures for special treatment services for pregnant women and women with dependent children
- o Maintain a capacity management system for programs that treat intravenous drug abuse
- Ensure that programs that use SAPT Block Grant funds to treat intravenous substance abuse conduct scientifically sound outreach activities to encourage individuals in need of such services to undergo treatment
- Implement a statewide needs assessment and planning process. Identifying State priorities and services to be provided
- Ensure that SAPT Block Grant-funded treatment programs routinely make TB services available to each substance abuse treatment client and, maintain a minimum level of Stateappropriated funds for TB services for substance abuse treatment clients

- Submit an assessment of statewide and locality-specific need for authorized Block Grant activities
- Develop and maintain an independent peer review system that assesses the quality, appropriateness, and efficacy of SAPT Block Grant-funded treatment services
- o Coordinate with other appropriate services (health, mental health, criminal justice, etc.)
- o Maintain a system to protect patient records from inappropriate disclosure
- Maintain a minimum level of State-appropriated expenditures for HIV early intervention service and, provides one or more HIV early intervention projects at substance abuse treatment sites
- Through an interagency agreement, fulfill the Synar Amendment requirements which include conducting inspections on tobacco sales to minors and producing an annual report. ADP provides oversight of this requirement to ensure SAPT BG funds to ADP continue at the maximum level. The State's failure to meet the requirements risks 40% of the State's federal SAPT allotment.

Data collection reporting and analysis

The ADP develops, contracts for, and maintains data collection for analytical purposes which include fiscal, programmatic and county performance data as well as for the dissemination of information regarding California's publicly funded alcohol and other drug prevention and treatment service system. Data submissions is monitored and validated to ensure complete, accurate data. The data collected, and other data, are used for planning, federal accountability measures and continuous quality improvement of the AOD service delivery system. Data is collected on an on-going basis and reported to SAMHSA on a prescribed schedule.

o <u>Data collection and reporting</u>

ADP performs vital data collection and reporting functions to satisfy the provisions of the SAPT Block Grant, as well as maintain the HIPAA compliant, automated Drug Medi-Cal (DMC) payment system. The critical data systems that support the federal reporting requirements and payment systems are as follows:

- California Outcomes Management System Treatment (CalOMS Tx): Collects client characteristic, demographic, service and treatment outcome data, submitted by all providers receiving any public funds through the counties, including SGF, SAPT, DMC, and county funds.
- Drug and Alcohol Treatment Access Report (DATAR): Collects data from all providers regarding availability of treatment slots and beds, and numbers on waiting lists to address the SAMHSA requirement for capacity management data.
- DMC Payment System (SMART): Provide an automated system for timely and accurate payments to DMC providers for medically necessary treatment services.
- CalOMS Prevention (CalOMS Pv): Collects client characteristic, demographic, service and prevention outcomes data, submitted by all prevention providers receiving any public funds through the counties.

o Data analysis

ADP directs, conducts, and supports applied research and evaluation, to provide quantitative estimates and forecasts, and to disseminate AOD information to the Department, control agencies, other government, and public stakeholders. ADP provides evidence-based information to AOD stakeholders allowing them to make data informed decisions.

ADP conducts county level performance assessments. Data provided to ADP through a web-based reporting system is analyzed and used to prepare assessments for on-site county monitoring reviews and identify potential compliance issues pursuant to the SAPT Block Grant requirements. The assessment tool also serves as an indicator for county TA and training needs.

ADP generates a Performance Assessment Tool utilizing the federally required National Outcome Measurement System data elements. The data elements are used by ADP to identify trends to benchmark outcomes, establish preferred practices and improve the quality of services.

Statewide Needs Assessment and Planning (SNAP)

Pursuant to the SAPT Block Grant requirements, ADP generates an annual Needs Assessment Report which analyzes treatment and prevention data, as well as prevalence, consumption and consequence trend data that identifies AOD service needs and gaps in California's publicly funded system. This systematic needs assessment is instrumental in developing local and statewide plan and establishing data-informed policies for formulating action plans for use with federal and State allocations. This process allows the State to comprehensively plan and prioritize the deployment of its resources as well as informing counties of the AOD prevention and treatment needs in California.

ADP staff coordinates efforts with county administrators, providers and other state departments to ensure progress is made toward meeting the SNAP goals.

Program Licensing and Certification (including DMC)

Program and facility licensure and certification is the key component of ensuring programs and service providers meet appropriate safety and programmatic standards and safeguards for the persons served. AOD services are licensed, certified, and monitored by APD. ADP has sole authority to license facilities located in California which provide 24-hour residential non-medical services to adults who are recovering from problems related to AOD abuse and who need AOD treatment services.

ADP also offers a voluntary AOD certification to residential and non-residential programs which exceed minimum levels of quality and are in compliance with State standards. Initial onsite reviews are completed prior to licensure and/or certification of AOD treatment facilities. Biennial onsite reviews are required to ensure ongoing compliance with regulatory requirements and the AOD Program Certification Standards.

ADP certifies programs to participate in the DMC program. Provider certification is required for a provider to be reimbursed for DMC services to eligible beneficiaries. The initial certification requires an onsite review prior to DMC certification. Periodic onsite Post Service-Post Payment reviews and financial audits are performed to identify billing errors and/or questionable billings.

Narcotic Treatment Program (NTPs) Licensing and Monitoring

NTPs provide replacement narcotic therapy in an outpatient, medically supervised setting to people who are addicted to opioids. Services include, but are not limited to, replacement narcotic medication and counseling. ADP has sole authority for the licensure of NTPs. Initial onsite reviews are completed prior to licensure of NTPs. Annual reviews are required to ensure ongoing compliance with federal laws, state statute and regulatory requirements.

As required by 45 C.F.R. § 96.136, ADP provides for independent peer review to assess the quality, appropriateness, and efficacy of treatment services provided in the State to individuals under the program involved, and insure that at least 5 percent of the entities providing services in the State under such program are reviewed each year.

Driving Under the Influence (DUI) Programs Licensing and Monitoring

The purpose of the DUI program is to reduce the number of repeat DUI offenses by persons who complete a state-licensed DUI program, and to provide participants an opportunity to address problems related to the use of alcohol and/or other drugs. ADP's role is to issue, deny, suspend, or revoke licenses of driving-under-the-influence (DUI) alcohol and drug education and counseling programs. ADP's responsibilities include renewing program licenses on a biennial basis, adopting regulations, approving participant fees and fee schedules, assessing fees for non-compliance, and providing TA.

Counselor Certification

To ensure persons in treatment programs are receiving adequate and effective services, AOD counselors are required to have certification. ADP approves certifying organizations (COs) for the purpose of registering and certifying individuals to provide AOD counseling. Each CO must meet regulatory requirements in order to remain an approved CO. Additionally, ADP investigates complaints received by ADP specific to inappropriate conduct by counselors and registrants. The field staff investigates complaints by interviewing witnesses and performing site visits as needed. If the allegation is substantiated, the field staff contacts the certifying organizations with instructions on how to proceed with a sanction for the counselor/registrant.

Provide technical assistance (TA) and training to counties, providers and other service systems which will include:

ADP provides counties, providers, and other service system representatives and entities with TA and training in support of a comprehensive, effective and efficient AOD service system that continuously improves prevention and treatment services. ADP educates and informs providers of emerging best practices and evidence based practices that increase positive client outcomes and effective state/local programs. This is accomplished through a variety of approaches, including webinars, regional trainings, county specific TA efforts and statewide conferences.

ADP provides TA to counties operating drug courts and ensures that the counties meet the nationally recognized ten-key components of a drug court program. ADP certifies that the counties are meeting the nationally recognized ten-key components of a drug court program. TA includes acting as a liaison between county alcohol and drug administrators, courts, and treatment providers to maximize efficiencies and effectiveness. Staff provides direct support to counties on data collection efforts to meet federal performance outcome requirements. In addition, staff assists counties in the maintenance and expansion of drug court programs.

ADP identifies TA and training needs through a variety of methods, including data provided to ADP from counties through a web-based reporting system. The data is analyzed and used to prepare assessments for on-site county monitoring reviews. The assessment tool also serves as an indicator for county TA and training needs.

o Translating research findings into practice

Federal requirements attached to SAPT Block Grant dollars and community awards increasingly demand a professional workforce capable of engaging at-risk communities and individuals as well as community and business leaders to deliver effective AOD-related

prevention activities. ADP develops and provides training on core competencies for experiential skills and specialized knowledge within the AOD prevention and treatment workforce.

<u>Development of program standards</u>

ADP establishes statewide standards for treatment of SUD to ensure that all clients receive appropriate care regardless of financial means or locale. Treatment standards describe services that favorably affect outcomes for clients with substance use problems and illnesses. Standards are intended to provide quality measures and decision support guidelines for certifying agencies, healthcare organizations, and payers.

Public information, education and information dissemination through the Resource Center (RC)

The BG requires that the State provide primary prevention services that fall under six specific strategies. ADP fulfills this requirement for two of the strategies by providing the singular Resource Center (RC) in the state. The RC disseminates multi-lingual information and educational materials on AOD use/abuse through a Clearinghouse, Lending Services, and a toll-free AOD service referral and information line.

The ADP Resource Center (RC) has four statewide lines of business. The RC Call Center responds to informational requests and makes treatment/information referrals to counties. The Clearinghouse sends out items across the state to individuals, schools, faith organizations and others as well as at conferences. The RC operates the state AOD prevention and treatment website with downloadable materials, and creates sections for evolving issues such as alcoholic energy drinks. The Lending Service holds almost 6,000 unique AOD materials for statewide use.

AOD-related problems impose collateral consequences on all taxpayers and immediate and devastating impacts to families and communities. ADP provides public education campaigns to continually educate the community about the ever changing risks and tactics used to expand AOD markets (i.e. heroin) and emerging AOD high risk trends (i.e. prescription painkillers).

The Office of Problem Gambling

The Office of Problem Gambling (OPG) is responsible for developing prevention and treatment programs to address problem and pathological gambling behaviors. OPG implemented and maintains statewide problem gambling prevention and treatment programs. Prevention programs include: toll-free multi-lingual telephone help-line services; a statewide public awareness campaign; empirically-driven research; and training and TA services for health care professionals, educators, law enforcement personnel, and members of nonprofit organizations in identifying problem gambling behavior and available resources. Treatment programs include: multi-lingual self-help workbooks and the California Problem Gambling Treatment Services Program (CPGTSP), a statewide stepped—care approach to treating gambling addiction. Treatment components include: training of licensed mental health care providers; Problem Gambling Telephone Intervention (PGTI) Program; and outpatient, intensive outpatient, and residential services.

OPG has integrated evaluation components into prevention and treatment programs to ensure delivery of best practices. Evaluation components include: the Call-to-Change (C2C) Program, an enhanced case management relapse prevention study of individuals that contact the problem gambling help-line for services; a complete feasibility and acceptability testing of the *Freedom from Problem Gambling* self-help workbook through consultation with problem gamblers, researchers, advocates and those in recovery; and Cognitive Behavioral Therapy (CBT)

Manuals, testing the effectiveness of manualized cognitive behavioral treatment for pathological gamblers.

Parolee Services Network (PSN)

In collaboration with the California Department of Corrections and Rehabilitation, ADP oversees community-based alcohol and drug treatment and recovery services to parolees in 17 PSN counties. ADP's responsibilities include releasing preliminary and final program budget allocations, approving annual work plans, monitoring counties for compliance with program requirements, performing annual on-site visits to PSN community based programs, and collecting and evaluating program data.

Administration of SAMHSA Discretionary Grants

As discretionary grants are made available to states, ADP determines the feasibility of applying for and if successful, administering the grants. At this time ADP has two discretionary federal grants. They are:

In 2010, ADP was awarded funds from SAMHSA for a Strategic Prevention Framework State Incentive grant (SPF SIG). ADP receives approximately \$2 million per year over the five-year grant period. ADP's SPF SIG will refine the use of the Strategic Prevention Framework at the State and local levels and provide evidence-based alcohol and other drug prevention programming to Californians most in need of services. Successful completion of this grant is required to ensure eligibility for future SAMHSA discretionary prevention grant funding. ADP is partnering with the Department of Public Health for collection, analysis and monitoring of epidemiological data sources for statewide needs assessment, planning, and outcomes. This grant fulfills needs identified by California communities to increase the use of evidence-based prevention programming and identify prevention outcomes to ensure program effectiveness.

o Access to Recovery (ATR) Grant

In 2010, ADP was awarded funds from SAMHSA for a third Access to Recovery (ATR) grant. ATR is an initiative to allow people in need of substance abuse services to make individual choices in their path to recovery that reflect their personal needs and values. The California Access to Recovery Effort (CARE) program is California's implementation of the federal ATR grant. This new award (CARE 3) provides approximately \$2.6 million per year for substance abuse treatment and recovery support services for youth and young service members/veterans in five target counties (Butte, Los Angeles, Sacramento, Shasta, and Tehama). The program will help address the unmet needs, service gaps, barriers, and disparities that youth and young veterans face in accessing adequate, quality substance abuse services.